



UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.:	9000/8
	First Inventor:	Louis W. Blanco et al.
	Title:	IN-CAR VIDEO SYSTEM USING FLASH MEMORY AS A RECORDING MEDIUM
	Express Mail Label No.:	ER 638132033 US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																				
<p>1. <input type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="16"/> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&amp;D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="2"/></p> <p>5. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); ii. <input type="checkbox"/> or paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>																																				
<p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. <input type="text"/></p> <p>Prior Appl. information: Examiner <input type="text"/> Group/Art Unit: <input type="text"/></p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																																					
<p><b>19. CORRESPONDENCE ADDRESS</b></p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label <input type="text" value="27774"/> or <input type="checkbox"/> Correspondence address below</p> <table border="1"><tr><td>Name</td><td colspan="5">Stuart H. Mayer</td></tr><tr><td>Address</td><td colspan="5">Mayer Fortkort &amp; Williams, PC</td></tr><tr><td>Address</td><td colspan="5">251 North Avenue West, 2<sup>nd</sup> Floor</td></tr><tr><td>City</td><td>Westfield</td><td>State</td><td>NJ</td><td>Zip Code</td><td>07090</td></tr><tr><td>Country</td><td>U.S.A.</td><td>Telephone</td><td>908-518-7700</td><td>Fax</td><td>908-518-7795</td></tr><tr><td>Name</td><td colspan="2">Stuart H. Mayer</td><td>Registration No.</td><td colspan="2">35,277</td></tr></table> <p>SIGNATURE <i>Stuart H. Mayer</i> Date <input type="text" value="10/22/03"/></p>		Name	Stuart H. Mayer					Address	Mayer Fortkort & Williams, PC					Address	251 North Avenue West, 2 <sup>nd</sup> Floor					City	Westfield	State	NJ	Zip Code	07090	Country	U.S.A.	Telephone	908-518-7700	Fax	908-518-7795	Name	Stuart H. Mayer		Registration No.	35,277	
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